





Epidemiology Resource Center

Adult Viral Hepatitis Prevention Program E-Newsletter March 4th, 2013

Introductions



Hi, my name is Brittany M. Gross, MPH and I am the new Viral Hepatitis Prevention Coordinator at the Indiana State Department of Health. I received my Masters of Public Health degree from Indiana University Bloomington. Previously, I attended Eastern Kentucky University where I majored in Chemistry and a received a Minor in Biology. I began in this new position January 2013. I look forward to working with you to minimize the effect of viral hepatitis in the state of Indiana. Should you have related viral hepatitis information or questions, or would just like to introduce yourself, please feel free to contact me by telephone at 317-233-7627 or through email

at bgross@isdh.in.gov. Can't wait to meet vou!

Note: This is the first of a series of monthly e-newsletters. It is my hope to provide you with current information and related activities on viral hepatitis. Please feel free to let me know your thoughts on the content as well as any suggestions for further topics you might find of interest.

What's Going On?

I am in the process of developing a comprehensive Indiana Viral Hepatitis Resource Guide! To accomplish this goal I need you response to a survey, asking what specific services your clinic provides and your training needs. When you or your staff receive this survey, through email, please ensure that it is filled out as completely as possible. The information gathered from the survey will be provided in the Resource Guide. If you do not receive this survey by March 29th and would like your facilities viral hepatitis services included in the Resource Guide please contact me. Together we can provide a valuable resource to all Indiana residents affected by viral hepatitis.

Viral Hepatitis Updates & News

Co-infection with Hepatitis B Increases Risk of Death

A Spanish research team reports that hepatitis B infection increases the risk of death by 75 percent for HIV/ hepatitis C-co-infected people. Earlier studies have focused on HIV/ hepatitis C co-infection or HIV/hepatitis B co-infection, but not the consequences of co-infection with all three viruses. Transmission is similar for HIV, hepatitis B, and hepatitis C. The study also indicated that HIV/hepatitis B/hepatitis C co-infection increases the risk of liver disease-related death. Researchers strongly recommended hepatitis B immunization for HIV-infected people and people at risk of HIV infection. The full article, "Hepatitis B Virus Infection Predicts Mortality of HIV and Hepatitis C Virus Co-infected Patients" was published online in the journal *AIDS* 27 (2013; doi:10.1097/QAD.obo13e32835ecaf7).

Hepatitis Webinar with CEU's

Below is a link to a webinar entitled "Hepatitis C Screening: An Urgent Priority" found on the knowhepatitis.org website. The webinar is free and offers CEU's for nurses and healthcare providers. This webinar last approximately 45 minutes.

http://www.knowhepatitis.org/hepcscreening

> Sounding the Alarm on a Silent Epidemic: Federal HIV/STD Advisory Group Adopts Viral Hepatitis as Priority

In support of enhanced cross-government efforts to address the prevention, care and treatment of viral hepatitis, a federal advisory body on HIV and STDs recently expanded its scope and title to include viral hepatitis. Now known as the CDC/HRSA Advisory Committee on HIV, Viral Hepatitis and STD Prevention and Treatment (CHAC), the body advises the Secretary of Health and Human Services, Director of the Centers for Disease Control and Prevention (CDC), and Administrator of the Health Resources and Services Administration (HRSA) on objectives, strategies, policies and priorities for HIV, viral hepatitis and STD prevention and treatment efforts.

Worked to integrate viral hepatitis into the work of the CHAC over the past nine months, these are some of the highlights:

- The CHAC established a Viral Hepatitis Workgroup to further the ongoing efforts of the committee to address this epidemic.
- The CHAC is working closely with federal and community partners to address the
 priorities of the Action Plan for the Prevention, Care and Treatment of Viral Hepatitis and
 other federal efforts, focusing on addressing patient and provider education, surveillance,
 testing, linkages to care, and research.
- The CHAC also recently endorsed CDC's recommendation for one-time HCV screening for persons born between1945-1965.

Funding Opportunity

The Substance Abuse and Mental Health Services Administration (SAMHSA) has released an application for Rapid Hepatitis C Virus Screening and Referral. The purpose of this grant is to address the high prevalence of viral hepatitis C infection among people with a history of injecting drug use that access selected opioid treatment programs (OTPs). In addition to providing rapid hepatitis C virus testing, applicants must develop a plan for providing referrals for care and treatment that include, but are not limited to primary health care, public health, mental health, and medical services for those who are HCV positive or are at high-risk of HCV infection. **To access the application, please contact me.**

Health departments are not eligible for this funding, but we encourage you to share this with OTPs in your jurisdiction.

Award Information

Anticipated Total Available Funding: \$1 Million

Anticipated Number of Awards: 25

Anticipated Award Amount: Up to \$40,000

Length of Project Period: One Year Application Due: April 5, 2013

Grant funds must be used for the following activities:

- Purchase of rapid HCV test kits, test controls, other required supplies that are needed to comply with regulations related to the HCV testing process;
- Implementation of quality assurance measures to appropriately conduct rapid HCV testing; and
- Appropriate staff training as it relates to implementing proper HCV rapid screening and testing techniques.

Eligibility

SAMHSA is limiting eligibility for this program to certified OTPs because OTPs are optimal settings in which to provide comprehensive hepatitis prevention and control services. The majority of OTP clients have a history of injecting drugs, placing them at high risk for human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS) and viral hepatitis. OTPs provide hepatitis C counseling, testing, treatment, and hepatitis A and B vaccinations, retain clients for extended periods of time, and have licensed medical facilities with medical staff. Only certified OTPs may apply because only they are qualified to provide opioid treatment under 42 CFR part 8. The statutory authority for this program prohibits grants to for-profit agencies.

For questions about grant program issues contact:

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Save the Date

2013 ISDH Public Health Nurse Conference

May 9-10, 2013

Sheraton Indianapolis Hotel at Keystone Crossing 8787 Keystone Crossing Indianapolis, IN 46240

Please mark your calendars for the 2013 ISDH Public Health Nurse Conference. Online registration and draft agenda will be made available in March 2013. Conference information will be sent out via email and highlighted in upcoming issues of the Health Officer News, the VacZine and posted on the LHD Resource SharePoint website.

For more information, contact:

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